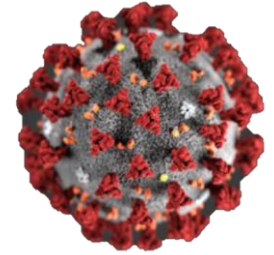


# New Hampshire Coronavirus Disease 2019 Weekly Call for School Partners



## Agenda:

- Opening Remarks – Dr. Ben Chan, Dr. Elizabeth Talbot, Dr. Beth Daly
- Q&A – To ask a question, use the Q&A feature in Zoom
  - Hover over bottom of Zoom screen to find “Q&A”
  - This is a public call, be careful about what you share (no confidential/sensitive information)
  - Ask general questions, individual consultation should be directed to the Bureau of Infectious Disease Control at 603-271-4496 (ask for a public health staff members)

# Weekly Educational/School Partner Call

- Every **Wednesday** from 3:30-4:30 pm every week
- Call-in information remains the same:
  - Zoom link: <https://nh-dhhs.zoom.us/j/98062195081>
  - Call-in phone number: (646) 558-8656
  - Meeting ID: 980 6219 5081
  - Passcode: 197445

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COVID-19 Education Liaison

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603-271-6591

# 4 Questions to be Answered Today

- Do we have any updates on antigen testing?
- What PPE should educators wear when within 6 feet of a student who is/not wearing a mask?
- Should schools trust a parent's/guardian's report that a child's symptoms are not new or unexplained?
- What should you do if you hear about a student/staff who tests positive?

# Question #1

## Do we have any updates on antigen testing?

- Federal government is buying supplies of the Abbott BinaxNOW antigen cards and will distribute to states
- We are still waiting for information on distribution plans from federal government
- We are discussing how we can make point-of-care antigen testing available to schools and provide the necessary guidance



# CLIA Certificate Needed for Testing

- Schools/SAUs need a CLIA certificate to use test:
  - CMS CLIA Application for Certification Form # 116:  
<https://www.cms.gov/Medicare/CMS-Forms/CMS-Forms/downloads/cms116.pdf>
  - School districts can have one certificate to cover multiple schools
- Questions about the CLIA certificate?
  - Contact Aaron Doyle (Health Facilities Administration):  
[Aaron.Doyle@dhhs.nh.gov](mailto:Aaron.Doyle@dhhs.nh.gov)

# Question #2

**What PPE should educators (includes SLP, PT/OT, support staff, etc.) wear when within 6 feet of a student or making physical contact?**

- School nurses should follow previously recommended PPE guidance for evaluating someone with symptoms of COVID-19
- Follow school policy on masking & implement layers of protection
- If an educator comes within 6 feet of a student (for any length of time) we recommend both student and educator be wearing a cloth face covering/mask
- If the educator is in close *prolonged* contact (10+ minutes), especially if the student is not wearing a face mask, then the educator should consider supplementing their face mask with a face shield (or use a Plexiglas barrier in situations where student/educator are seated within 6 feet for services)

# Question #2 (cont.)

- If the student has difficulty controlling oral/respiratory secretions (biting, spitting, drooling, etc.), and educator is to be within 6 feet of the individual or come into contact with secretions:
  - A face shield is recommended
  - Gloves should be used if any anticipated hand contact with saliva or respiratory secretions
  - Wear a gown, or at a minimum changeable cloths (laundered at home), if body contact is anticipated with a person's oral or respiratory sections
  - Focus on good hand hygiene
  - Frequent cleaning and disinfection of the environment



# Question #3

## **Should schools trust a parent's report that a child's symptoms are not new or unexplained?**

- We certainly want you to be able to trust parent reports
- Each situation is different
- Schools/districts need to develop a policy on what information may/not be required if a student presents with symptoms of COVID-19
- This is not primarily the responsibility of the school nurse to vet whether a student's symptoms are chronic

# Examples of Situations When a Student Might Present with Symptoms

- Student's chronic medical condition and associated symptoms has been documented ahead of time by parent/guardian in the school record – **Yes, allow in school**
- Parent/guardian states symptoms are chronic and has a letter from a healthcare provider documenting an underlying health condition and symptoms – **Yes, allow in school**
- Child presents with runny nose during winter and parent/guardian states they think it's the cold weather because the child had no symptoms that morning and no other signs/symptoms of illness; after coming indoors runny nose improves – **Yes, allow in school**
- There is no documentation of a chronic medical condition, and when questioned parent/guardian states that the child's symptoms are normal for them – **Advise caution, what does "normal" mean?**
  - Child periodically has runny nose & nasal congestion during the year?
  - Child has allergies and takes medications to treat symptoms?

# Suggestions

- Any chronic medical condition and associated symptoms should be documented ahead of time
  - At a minimum we recommend that a school's Health Screening Form be filled out by parents/guardians at the start of the school year documenting a student's health condition and symptoms (+/- provider documentation)
- If a student presents with symptoms and there is no documentation, then you need to determine on a case-by-case basis (refer to school policy). Possible options include:
  - Assess situation based on a discussion with parent/guardian
  - The child is excluded until documentation by a healthcare provider about chronic condition and symptoms
- If chronicity of symptoms is unclear, the student should be excluded until they meet criteria for being off isolation (2 options)

# Allowing People off Isolation

- People with new or unexplained symptoms of COVID-19 can be let off isolation when:
  - All three following criteria are met:
    1. They test negative with an appropriate test (PCR or antigen test)
    2. They are fever free (off fever-reducing medications), and other symptoms improving for at least 24 hours (normal recs)
    3. They have no risk factor for COVID-19 exposure that would require the person to complete a 14-day quarantine after testing negative
  - OR**
  - Person has met CDC criteria for discontinuation of isolation (at least 10+ days of isolation, assuming possible COVID-19)

# Testing Patients with Mild Symptoms

- Testing people with mild symptoms serves two purposes:
  1. Prevent early introduction of COVID-19 into the school
  2. Identify early transmission – most children with COVID-19 will present with only mild symptoms
- There is no shortage of testing capacity in NH
- Testing may not be medically necessary, but it is necessary from a public health standpoint
- Schools/SAUs should develop policies for how to address these challenging situations and can choose to deviate from our “ideal” recommendations

# Question #4

## What should you do if you hear about a student/staff who tested positive?

- Schools have identified COVID-19 in staff and students in their schools (see [School Dashboard](#))

	Number of Active Cases	Number of Recovered Cases	Number of Clusters	Number of Outbreaks
Elementary Schools	5	2	0	0
Middle Schools	0	2	0	0
High Schools	6	6	0	0
<b>Total</b>	<b>11</b>	<b>10</b>	<b>0</b>	<b>0</b>

# Question #4

## **What should you do if you hear about a student/staff who tested positive?**

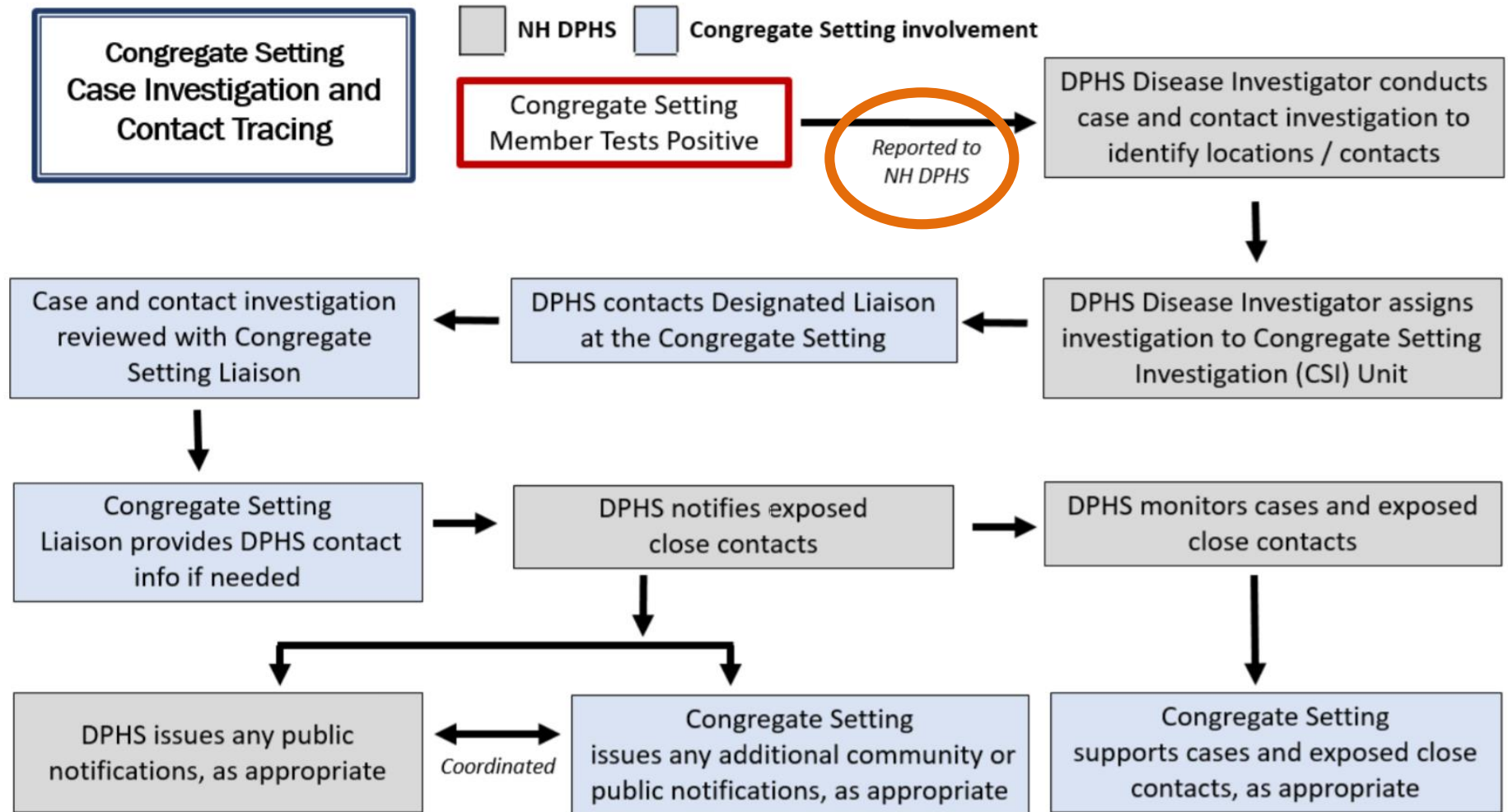
- Schools have identified COVID-19 in staff and students in their schools (see [School Dashboard](#))
- No clusters or outbreaks have yet been identified in K-12 schools
- We expect there to continue to be people with COVID-19 identified in schools because COVID-19 continues to circulate in our communities

# Question #4 (cont.)

- We have created guidance for schools to help inform responses to confirmed cases & when schools might consider moving to remote learning (or loosening restrictions):
  - [NH COVID-19 School Toolkit](#)
  - [Recommendations for Responding to COVID-19 in K-12 Schools](#)
  - [Considerations for Transitioning Between School Instructional Models](#); which is based on:
    1. Levels of community transmission
    2. Impact of COVID-19 on individual schools



# School Toolkit: Response & Contact Tracing



## Checklist – Responding to Individuals with New or Unexplained COVID-19 Symptoms or Confirmed COVID-19 Case

### Immediate Actions

- ☐ Exclude any staff or students from the facility that are ill or have tested positive for COVID 19 until [return to work criteria](#) or [removal from home isolation](#) criteria have been met.
- ☐ Management of Household Contacts (HHCs) of Persons with New and Unexplained Symptoms of COVID-19, Based on the Symptomatic Person's COVID-19 Risk Factors and Testing Status (see Table)
- ☐ Work with NH DHHS to identify close contacts who should be excluded from school until their [14 day quarantine period](#) has ended.
- ☐ Do not permit those who are on quarantine or isolation to enter the school or campus.
- ☐ Notify NH DPHS about confirmed cases of COVID-19, or a cluster of students or staff with symptoms of COVID-19 (a cluster is 3 or more students or staff within the same classroom with new-onset respiratory symptoms over 72 hours).
  1. Call [603-271-4496](#) (after-hours [603-271-5300](#)).
- ☐ Review [Recommendations for Responding to COVID-19 in K-12 Schools](#)
- ☐ For any person that is presenting with new or unexplained symptoms (NUS) of COVID-19 while at the education facility:
  1. Mask the symptomatic person ([unless they cannot do so safely](#)). Be sure mask is properly covering the nose and mouth.
  2. Place the symptomatic person in a private room with the door closed if safe to do so (at a minimum they should be separated from others).
  3. If in the same room as the symptomatic person, the nurse should wear:
    - a. A surgical face mask at all times.
    - b. Eye protection (goggles or face shield) if the nurse is within feet of the person, OR if the symptomatic person is unable to wear a face mask (even if more than 6 feet away).
    - c. If prolonged close contact is anticipated (within 6 feet of the person for 10 total minutes or more), or if there is contact with the person's secretions/excretions, then wear all appropriate [recommended PPE](#), including: surgical face mask, eye protection, gown, and gloves.
  4. Record the symptomatic person's temperature.
  5. Perform a brief assessment of the person's complaints or symptoms. Keep any assessment brief and stay at least 6 feet away to the extent possible.
  6. The symptomatic person should go home by private transportation.

# Considerations for Transitioning Between School Instructional Models

# Instructional Model Decision Matrix

		Level of Community Transmission		
		Minimal	Moderate	Substantial
Level of School Impact	Low	In-Person	In-Person	Hybrid
	Medium	In-Person	Hybrid	Remote
	High	Hybrid	Remote	Remote

# Defining Level of Community Transmission

- The overall transmission level should be assigned based the highest level identified by any one of the criteria below.

Criteria	Level of Community Transmission		
	Minimal	Moderate	Substantial
PCR test positivity as a 7 day average	< 5%	5 – 10%	>10%
Number of new infections per 100,000 population over prior 14 days	<50	50-100	>100
Number of new hospitalizations per 100,000 population over prior 14 days	<10	10-20	>20

# Defining Level of School Impact

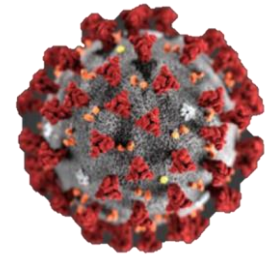
- The overall level of school impact should be assigned based the highest level identified by any one of the following criteria.

Criteria	Level of School Impact		
	Low	Medium	High
Transmission within the school facility	Zero or sporadic cases with no evidence of transmission within the school setting	One cluster* in the school	Two or more unrelated clusters* in the school with onset (based on source case symptom onset dates) within 14 days of each other
Student absenteeism due to illness	<15%	15-30%	>30%
Staff capacity to conduct classes and school operations	Normal	Strained	Critical

\* A cluster is defined as 3 or more individuals confirmed with COVID-19 who are part of a related group of individuals (e.g., classroom) who had the potential to transmit infection to each other through close contact.

# Additional Questions & Answers

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